

James A. Burkush
Chief of Department



City of Manchester

Fire Department

Fire Prevention Bureau

APPLICATION FOR INSTALLATION OF FIRE SUPPRESSION / CLEAN AGENT SYSTEMS

Project Address: _____
Project Name and/or Building #: _____
Owner's Name: _____
Address: _____
Phone #: _____
Installer's Name: _____
Installer's Address: _____
Installer's Phone #: _____ Fax #: _____
Designer's Name: _____
Designer's Address: _____
Designer's Phone #: _____

(Fire Department use only)

Date Received

Application #

Date Reviewed

Date Approved

Check Received and Check #

Fire Alarm Permit # _____ Electrical Permit # _____ Mechanical Permit # _____

Type of Building: _____ Type of Occupancy: _____
Manufacturer of Equipment: _____
Method of Suppression: _____ Wet Chemical _____ Dry Chemical _____ Clean Agent _____
Type of Detection / Activation: _____
Number of Tanks: _____ Number of Nozzles: _____
Number of Appliances Covered: _____ Number of Links and Temp: _____
Utility Shut Down: _____ Air Handling Shut Down: _____
Sprinkler System Modifications: _____
Type of Connection to MFD Headquarters: _____

Provide the Following With Application:

_____ Plot Plan _____ Floor Plans

Equipment must be installed in accordance with applicable N.F.P.A. and Manchester Fire Department Rules and Regulations governing fire suppression systems / clean agent systems and manufacturer installation instructions. Permits and Inspections shall be required for all new installations and to any work or modification to existing fire suppression / clean agent system.

Application is hereby made for approval for the installation of sprinkler system.

Date: _____

Signature of Owner or Applicant

NOTE: Upon receipt of application, properly executed, applicant will be advised as to the submittal of additional information and data required, such as detailed description, drawings, photographs, or laboratory test reports.